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Approved for use through 10/31/2002. OMB 0651-0032
Patent and Trademark Office: U.S. DEPARTMENT OF COMMERCE

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UTILITY PATENT APPLICATION TRANSMITTAL

(Only for new nonprovisional applications under 37 CFR 1.53(b))

Attorney Docket No.

050320-1040

First Inventor

John Haines

Title

SYSTEM AND METHOD FOR PROVIDING MEDICAL CARE VIA A
VIRTUAL CALL CENTER

Express Mail Label No

EL789318587US

APPLICATION ELEMENTS

See MPEP Chapter 600 concerning utility patent application contents

ADDRESS TO:

Assistant Commissioner for Patents
Box Patent Application
Washington, DC 20231

☐ APPLICANT REQUESTS EARLY PUBLICATION UNDER 37 CFR 1.219 (additional fee)

1. ☒ Fee Transmittal Form (e.g., PTO/SB/17)
(Submit an original, and a duplicate for fee processing)
2. ☐ Applicant claims small entity status.
3. ☒ Specification [Total Pages **22**]
(preferred arrangement set forth below)
- Descriptive title of the invention
 - Cross References to Related Applications
 - Statement Regarding Fed. Sponsored R&D
 - Reference to sequence listing, a table, or a computer program listing appendix
 - Background of the Invention
 - Brief Summary of the Invention
 - Brief Description of the Drawings (if filed)
 - Detailed Description
 - Claim(s)
 - Abstract of the Disclosure

4. ☒ Drawing(s) (35 USC 113) [Total Sheets **4**]

5. Oath or Declaration [Total Pages **3**]

- a. ☒ Newly Executed (original or copy)
- b. ☐ Copy from a prior application (37 CFR 1.63(d))
(for continuation/divisional with Box 17 completed)
- i. ☐ **DELETION OF INVENTOR(S)**
Signed statement attached deleting inventor(s)
named in the prior application,
see 37 CFR 1.63(d)(2) and 1.33(b)

6. ☐ Application Data Sheet See 37 CFR 1.76

Assignee
Name and Address
(if applicable)
**Cyber-Care, Inc.
2500 Quantum Blvd, Suite 1000
Boynton Beach, FL 33426**

7. ☐ CD-ROM or CD-R in duplicate, large table or Computer Program (Appendix)
8. Nucleotide and/or Amino Acid Sequence Submission
(if applicable, all necessary)
- a. ☐ Computer Readable Copy (CRF)
- b. Specification Sequence Listing on
- i. ☐ CD-ROM or CD-R (2 copies), or
- ii. ☐ Paper
- c. ☐ Statements verifying identity of above copies

ACCOMPANYING APPLICATION PARTS

9. ☐ Assignment Papers (cover sheet & Documents(s))
10. ☐ 37 CFR 3.73(b) Statement ☐ Power of Attorney
(when there is an assignee)
11. ☐ English Translation Document (if applicable)
12. ☐ Information Disclosure Statement (IDS)/PTO-1449 ☐ Copies of IDS Citations
13. ☐ Preliminary Amendment
14. ☒ Return Receipt Postcard (MPEP 503)
(Should be specifically itemized)
15. ☐ Certified Copy of Priority Document(s)
(if foreign priority is claimed)
16. ☐ Request and Certification under 35 U.S.C. 122(b)(2)(B)(i). Applicant must attach form PTO/SB/35 or its equivalent
17. ☐ Other

18. If a CONTINUING APPLICATION, check appropriate box and supply the requisite information below and in a preliminary amendment, or in an Application Data Sheet under 37 CFR 1.76:

☐ Continuation ☐ Divisional ☐ Continuation-in-part (CIP) of prior application No: /

Prior application information: Examiner

Group / Art Unit:

For CONTINUATION OR DIVISIONAL APPS only the entire disclosure of the prior application, from which an oath or declaration is supplied under Box 5b, is considered a part of the disclosure of the accompanying continuation or divisional application and is hereby incorporated by reference. This incorporation can only be relied upon when a portion has been inadvertently omitted from the submitted application parts

18. CORRESPONDENCE ADDRESS



Customer Number or Bar Code Label

24504

(Insert Customer No. or Attach bar code label here)



Correspondence address below

NAME	Peter A. Nieves Thomas, Kayden, Horstemeyer & Risley, L.L.P.		
ADDRESS	100 Galleria Parkway Suite 1750		
CITY	Atlanta	STATE	Georgia
COUNTRY	U.S.A.	TELEPHONE	770-933-9500
		ZIP CODE	30339-5948
		FAX	770-951-0931

Name (Print/Type)	Peter A. Nieves	Registration No. (Attorney/Agent)	48,173
Signature		Date	7/27/01

Burden Hour Statement: This form is estimated to take 0.2 hours to complete. Time will vary depending upon the needs of the individual case. Any comments on the amount of time you are required to complete this form should be sent to the Chief Information Officer, Patent and Trademark Office, Washington, DC 20231. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Assistant Commissioner for Patents, Box Patent Application, Washington, DC 20231

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FEE TRANSMITTAL
for FY 2000

Patent fees are subject to annual revision

Complete If Known

Application Number	To Be Assigned
Filing Date	Herewith
First Named Inventor	Haines
Examiner Name	To Be Assigned
Group / Art Unit	To Be Assigned
Attorney Docket No.	050320-1040

TOTAL AMOUNT OF PAYMENT (\$) 800.00

METHOD OF PAYMENT

- 1.
- ☒
- The Commissioner is hereby authorized to charge to the following Deposit Account.

Deposit Account Number

20-0778

Deposit Account Name

Thomas, Kayden, Horstemeyer Risley

- ☐ Charge all indicated fees and any additional fee required or credit any overpayment
- ☒ Charge any additional fee required and requested to credit any overpayment.
- ☐ Applicant claims small entity status. See 37 CFR 1.27

- 2.
- ☒
- Payment Enclosed:**



Check



Money Order



Credit Card

FEE CALCULATION**1. BASIC FILING FEE**

Large Fee Code	Entity Fee (\$)	Small Fee Code	Entity Fee (\$)	Fee Description	Fee Paid
101	710	201	355	Utility filing fee	\$710
106	320	206	160	Design filing fee	\$
107	490	207	245	Plant filing fee	\$
108	710	208	355	Reissue filing fee	\$
114	150	214	75	Provisional filing fee	\$
SUBTOTAL (1)					(\$710)

2. EXTRA CLAIM FEES

	Extra Claims	Fee from below	Fee Paid
Total Claims	25	-20** = 5	18.00 = 90
Independent Claims	3	-3** = 0	80.00 = 0
Multiple Dependent		270.00	0

**or number previously paid, if greater. For Reissue, see below

Large Fee Code	Entity Fee (\$)	Small Fee Code	Entity Fee (\$)	Fee Description
103	18	203	9	Claims in excess of 20
102	80	202	40	Independent Claims in excess of 3
104	270	204	135	Multiple dependent claims in excess of 3
109	80	209	40	**Reissue independent claims over original patent
110	18	210	9	**Reissue claims in excess of 20 and over original patent

SUBTOTAL (2) (\$90)

FEE CALCULATION (continued)**3. ADDITIONAL FEES**

Large Fee Code	Entity Fee (\$)	Small Fee Code	Entity Fee (\$)	Fee Description	Fee Paid
105	130	205	65	Surcharge - late filing fee	
127	50	227	25	Surcharge - late provisional filing fee or cover sheet	
139	130	139	130	Non-English specification	
147	2,520	147	2,520	For filing a request for reexamination	
112	920*	112	920*	Requesting publication of SIR prior to Examiner action	
113	1,840*	113	1,840*	Requesting publication of SIR after Examiner action	
115	110	215	55	Extension for reply within first month	
116	390	216	195	Extension of time within second month	
117	890	217	445	Extension of time within third month	
118	1,390	218	695	Extension of time within fourth month	
128	1,890	228	945	Extension of time within fifth month	
119	310	219	155	Notice of Appeal	
120	310	220	155	Filing a brief in support of an appeal	
121	270	221	135	Request for oral hearing	
138	1,510	138	1,510	Petition to institute a public use proceeding	
140	110	240	55	Petition to revive - unavoidable	
141	1,240	241	620	Petition to revive - unintentional	
142	1,240	242	620	Utility issue fee (or reissue)	
143	440	243	220	Design issue fee	
144	600	244	300	Plant issue fee	
122	130	122	130	Petitions to the Commissioner	
123	50	123	50	Petitions related to provisional applications	
126	180	126	180	Submission of Information Disclosure Stmt.	
581	40	581	40	Recording each patent assignment per property (time number of properties)	
146	710	246	355	Filing a submission after final rejection (37 CFR 1.129(a))	
149	710	249	355	For each additional invention to be examined (37 CFR 1.129(b))	
179	710	279	355	Request for Continued Examination (RCE)	
169	900	169	900	Request for expedited examination of a design application	

Other fee (specify)

Other fee (specify)

*Reduced by Basic Filing Fee Paid

SUBTOTAL (3)

SUBMITTED BY

Typed or Printed Name

Peter A. Nieves

Signature

Date

7/27/01

Complete (if applicable)

Reg Number

48,173

Deposit Account User ID

PATENTS

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

In re: John Haines *et al.*

For: SYSTEM AND METHOD FOR PROVIDING MEDICAL CARE VIA A VIRTUAL CALL CENTER

CERTIFICATE OF EXPRESS MAIL

Assistant Commissioner for Patents
BOX: Patent Application
Washington, D.C. 20231

Sir:

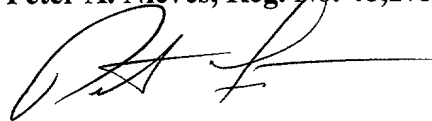
Enclosed for filing in the above case are the following documents:

Return Postcard
Utility Patent Application Transmittal Page
Fee Transmittal Page
Utility Patent Application Consisting Of:
15 Pages of Specification
6 Pages of Claims
1 Pages of Abstract
4 Pages of Formal Drawings
Declaration/Power of Attorney
Credit Card Payment Form in the amount of \$800.00

Further, the Commissioner is authorized to charge Deposit Account No. 20-0778 for any additional fees required. The Commissioner is requested to credit any excess fee paid to Deposit Account No. 20-0778.

Respectfully submitted,

Peter A. Nieves, Reg. No. 48,173



**THOMAS, KAYDEN, HORSTEMEYER
& RISLEY, L.L.P.**

100 Galleria Parkway, N.W.
Suite 1750
Atlanta, Georgia 30339-5948

Our Docket No: **050320-1040**

I hereby certify that all correspondences listed above are being deposited for delivery to the above addressee, with the United States Postal Service **"EXPRESS MAIL POST OFFICE TO ADDRESSEE"** service under 37 CFR §1.10 on the date indicated below:

The envelope has been given U.S. Postal Service "Express Mail Post Office To Addressee" Package # **EL789318587US**.

Date:

July 27, 2001

Julie Campbell

